

# Preferences for the provision of oral and injectable PrEP among MSM and transgender persons who discontinued oral PrEP in Europe

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## RATIONALE

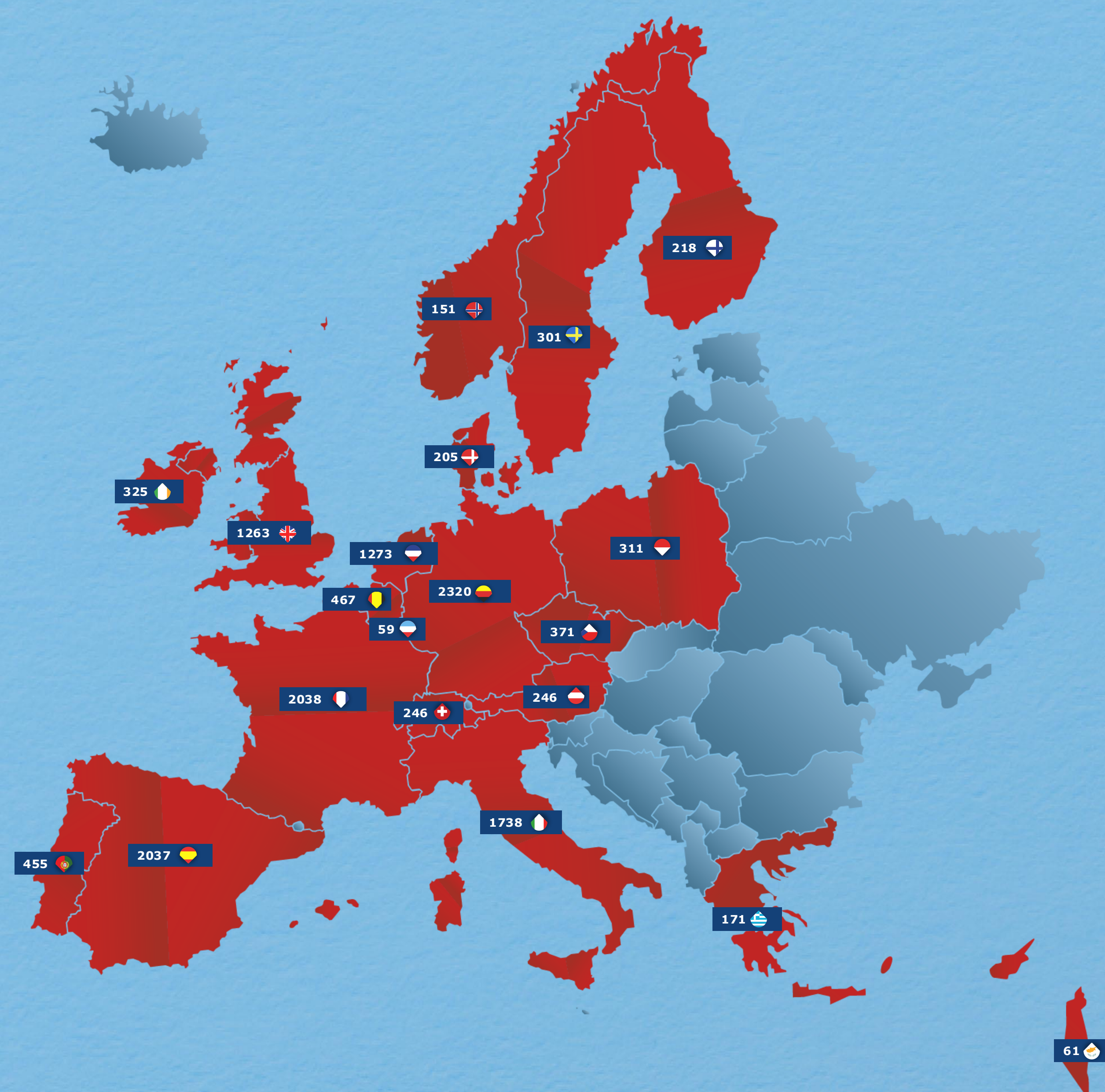
Provider barriers are common barriers to discontinue PrEP. Insight into provider preferences are essential for PrEP implementation to be able to adapt to client's needs. We identify characteristics of discontinued users and explore their past oral PrEP-provider and preferred provider of oral and LA-PrEP, and whether mismatch between past and preferred oral PrEP-provider is associated with intention and preference for LA-PrEP.

## THE EUROPEAN PROTECT SURVEY

The Understanding Pre-exposure prophylaxis modalities for HIV prevention in the European Communities (PROTECT) Survey is a cross sectional online survey that collected data in 20 European countries. Data collection occurred from October to December 2023 among MSM and trans\* people greater than 18 years old.

This study included:

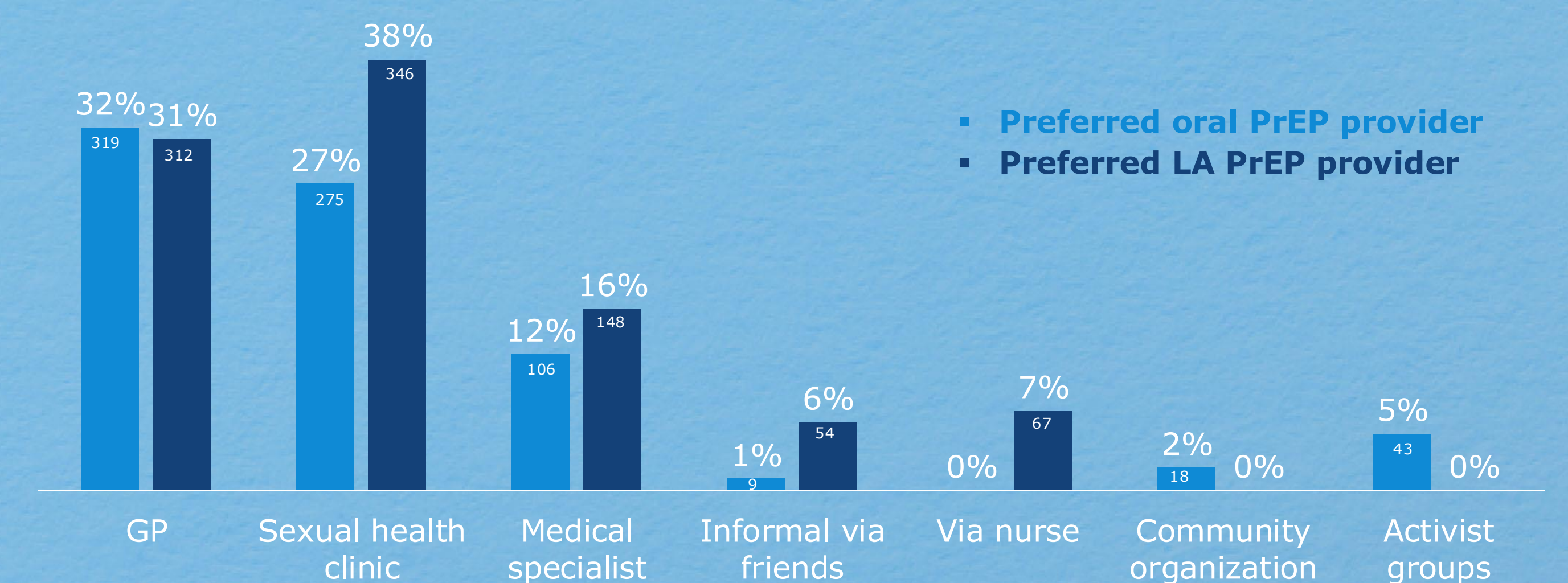
- 14.351** MSM, trans\* and non-binary participants
- 7.043 (49%)** PrEP-naïve
- 6.341 (44%)** Current oral PrEP users
- 967 (7%)** Discontinued oral PrEP



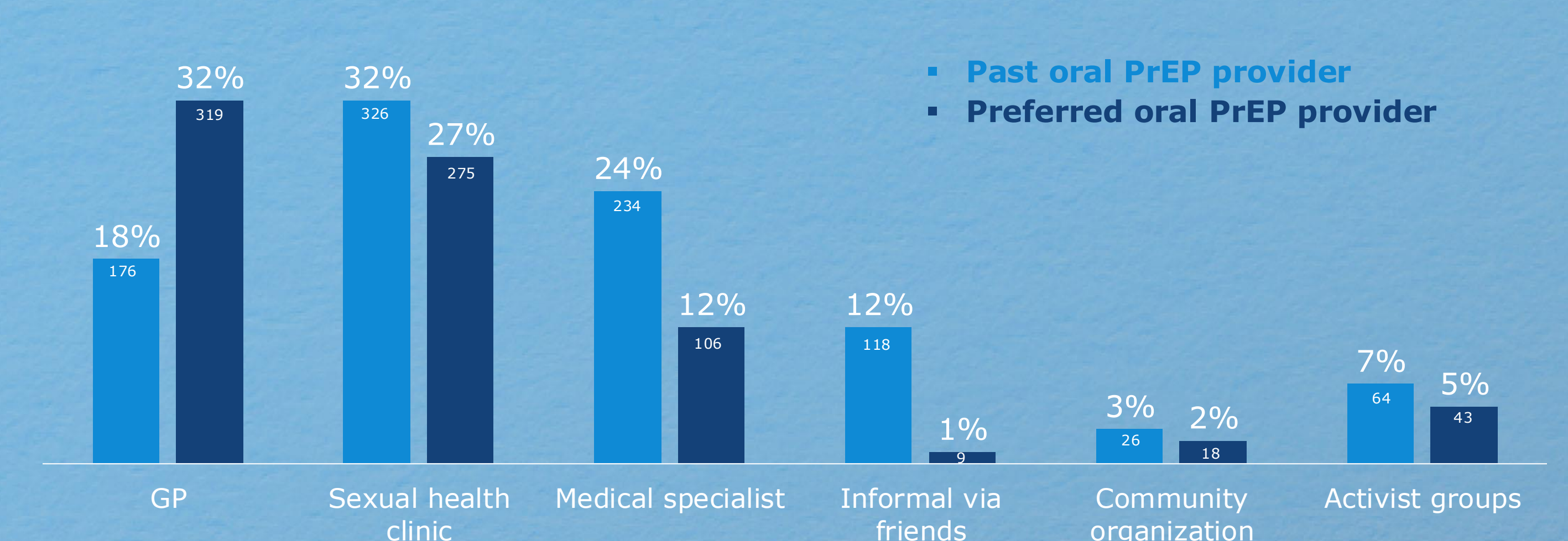
## KEY FINDING 1: LONG-ACTING PREP INTENTION IS HIGH AMONG DISCONTINUED ORAL PREP USERS

- 59% (4248/7043)** among PrEP naïve
- 76% (4973/6341)** among current oral PrEP users
- 78% (778/967)** among discontinued oral PrEP users

## KEY FINDING 2: 51% OF DISCONTINUED USERS PREFERRED A DIFFERENT PROVIDER FOR ORAL THAN FOR LONG-ACTING PREP



## KEY FINDING 3: 59% OF DISCONTINUED USERS PREFERRED A DIFFERENT PROVIDER THAN WHERE THEY ACCESSED ORAL PREP IN THE PAST



## KEY MESSAGES

- Provider mismatches are highly common in discontinued users.
- A mismatch of preferred access pathways may result in discontinuation, inhibit re-uptake and may also inhibit uptake of new modalities
- Sexual health clinics and GPs are the most preferred access pathway for LA PrEP among MSM.

## KEY FINDING 4: DISCONTINUED USERS WITH A MISMATCH STILL PREFERRED ORAL OVER LONG-ACTING PREP

Mismatch between past-preferred oral PrEP provider was **not associated with high LA PrEP intention** (aOR=1.04, 95%CI=0.76-1.43)

**But this mismatch was associated with preferring oral PrEP over LA PrEP** (aOR=0.62, 95%CI=0.46-0.85)

